

Certificate of Compliance by Nonparticipating Manufacturer Regarding Escrow Payment

Part 1: Manufacturer's Identification

1. Name: _____
2. Street address: _____
3. City, state, country, ZIP: _____
4. Phone: _____ FAX: _____
5. Electronic mail address: _____

Part 2: Sales Year

6. This Certificate relates to sales for the following year: 2003

Part 3: Units Sold

7. Number of individual cigarettes, including "roll-your-own" tobacco (0.09 ounces constitutes one cigarette), sold by the Manufacturer identified above to consumers in New Jersey during the Sales Year:

Part 4: Deposit Amount

8. For the Sales Year 2003, the rate per cigarette is: 0.0167539
9. Base Deposit amount: Multiply Line 8 by Line 7: _____
10. Inflation Adjustment: Multiply line 9 by 16.3627565 % (0.163627565)*: _____
* The cumulative inflation adjustment is calculated pursuant to
Exhibit C of the "Master Settlement Agreement."
11. Total Deposit Amount: Add line 9 and line 10: _____

Part 5: Financial Institution Holding Escrow Deposit

12. Name: _____
13. Street address: _____
14. City, state, country, ZIP: _____
15. Phone: _____ FAX: _____
16. Electronic mail address: _____
17. Escrow account number: _____
18. Total amount held in this account: \$ _____

Part 6: Certification

I hereby certify that the foregoing statements are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Name of Authorized Agent/Representative : _____ Title: _____

Signature of Authorized Agent/Representative: _____ Date: _____

NOTE: Proof of deposit of the required funds from your financial institution and a fully executed copy of your escrow fund agreement must accompany this Certificate. This documentation must be submitted to the following address:

State of New Jersey
Department of Law & Public Safety
Division of Law
R.J. Hughes Justice Complex
25 Market Street, P.O. Box 106
Trenton, New Jersey 08625-0106
Attn: Edward D. Tan, D.A.G.